

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Stonewall Democratic Club

ADDRESS (number and street)

1212 S Victory Bl

☐Check if different
than previously
reported. (ACC)

Burbank

CA

91502

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00323923

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 1 0

through

1 1

2 2

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kinde Durkee

Signature of Treasurer

Electronically Filed by Kinde Durkee

Date

1 1

3 0

2 0 1 0

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**

(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 24

Write or Type Committee Name
Stonewall Democratic Club

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	2234.61
(b) Cash on Hand at Beginning of Reporting Period	3988.28	
(c) Total Receipts (from Line 19)	1690.00	30091.81
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5678.28	32326.42
7. Total Disbursements (from Line 31)	5150.31	31798.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	527.97	527.97
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 24

Write or Type Committee Name

Stonewall Democratic Club

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	7524.80
(i) Itemized (use Schedule A)		
(ii) Unitemized	1440.00	12118.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1440.00	19642.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	805.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1440.00	20447.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	250.00	250.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.32
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	9393.59
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	9393.59
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1690.00	30091.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1690.00	20698.22

DETAILED SUMMARY PAGE

of Disbursements

4 / 24

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	263.99	12917.00	
(ii) Non-Federal Share.....	263.98	11719.17	
(b) Other Federal Operating Expenditures.....	1840.23	3985.55	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	2368.20	28621.72	
22. Transfers to Affiliated/Other Party Committees.....	2500.00	2500.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	57.00	182.00	
24. Independent Expenditure (use Schedule E)	225.11	369.73	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	125.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5150.31	31798.45	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4886.33	20079.28	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1440.00	20447.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1440.00	20447.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2104.22	16902.55
37. Offsets to Operating Expenditures (from Line 15, page 3)	250.00	250.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1854.22	16652.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 24

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Stonewall Democratic Club

A.

Full Name (Last, First, Middle Initial)
Christopher Street West Association Inc

Mailing Address 8235 Santa Monica Blvd #302

City State Zip Code
West Hollywood CA 90046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA150000000000773019

Amount of Each Receipt this Period

250.00

Refund

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

A. Full Name (Last, First, Middle Initial) Frontiers Newsmagazine Payment Dept	Transaction ID: SB21b000000000777042 Date of Disbursement																				
Mailing Address 5657 Wilshire Bl #500	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	1	0												
City Los Angeles State CA Zip Code 90036	Amount of Each Disbursement this Period																				
Purpose of Disbursement Email Blast Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Targeted Communications	Transaction ID: SB21b000000000777034 Date of Disbursement																				
Mailing Address 5812 1/2 N Figueroa St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	1	0
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City Los Angeles State CA Zip Code 90042	Amount of Each Disbursement this Period																				
Purpose of Disbursement Automated Calls Candidate Name	<table border="1"> <tr> <td colspan="10">258.88</td> </tr> </table>	258.88																			
258.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000762350 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	1	0
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City Glendale State CA Zip Code 91203	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">1.35</td> </tr> </table>	1.35																			
1.35																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1760.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

A.

Full Name (Last, First, Middle Initial)
United Merchant Services/D&A

Mailing Address 750 Fairmont Ave #201

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21b000000000763317

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

11.75

B.

Full Name (Last, First, Middle Initial)
United Merchant Services/D&A

Mailing Address 750 Fairmont Ave #201

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21b000000000763319

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2.70

C.

Full Name (Last, First, Middle Initial)
United Merchant Services/D&A

Mailing Address 750 Fairmont Ave #201

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21b000000000765136

Date of Disbursement

10 / 12 / 2010

Amount of Each Disbursement this Period

5.40

SUBTOTAL of Disbursements This Page (optional)

19.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 9 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

A. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000765139 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	1	0												
<table border="1"> <tr> <td>City Glendale</td> <td>State CA</td> <td>Zip Code 91203</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Credit Card Processing Fee</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Glendale	State CA	Zip Code 91203	Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>2.70</td> </tr> </table>	2.70											
City Glendale	State CA	Zip Code 91203																			
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type																			
Candidate Name																					
2.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000769546 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
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City Glendale	State CA	Zip Code 91203																			
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Candidate Name																					
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000769548 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	1		2	0	1	0												
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City Glendale	State CA	Zip Code 91203																			
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type																			
Candidate Name																					
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>5.40</td> </tr> </table>	5.40																			
5.40																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

A.

Full Name (Last, First, Middle Initial)
United Merchant Services/D&A

Mailing Address 750 Fairmont Ave #201

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21b000000000769549

Date of Disbursement

10 / 20 / 2010

Amount of Each Disbursement this Period

1.35

B.

Full Name (Last, First, Middle Initial)
United Merchant Services/D&A

Mailing Address 750 Fairmont Ave #201

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21b000000000770918

Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

6.35

C.

Full Name (Last, First, Middle Initial)
United Merchant Services/D&A

Mailing Address 750 Fairmont Ave #201

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21b000000000772976

Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

7.70

SUBTOTAL of Disbursements This Page (optional)

15.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

A. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000772978 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	1	0												
City Glendale State CA Zip Code 91203	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td>2.70</td> </tr> </table>	2.70																			
2.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
B. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000772979 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	1	0												
City Glendale State CA Zip Code 91203	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td>2.70</td> </tr> </table>	2.70																			
2.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
C. Full Name (Last, First, Middle Initial) United Merchant Services/D&A	Transaction ID: SB21b000000000774154 Date of Disbursement																				
Mailing Address 750 Fairmont Ave #201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	8		2	0	1	0												
City Glendale State CA Zip Code 91203	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td>1.35</td> </tr> </table>	1.35																			
1.35																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>6.75</td> </tr> </table>	6.75																			
6.75																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td>1807.63</td> </tr> </table>	1807.63																			
1807.63																					

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 24

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Stonewall Democratic Club

A.

Full Name (Last, First, Middle Initial)

Stonewall Democratic Club Issues And Advocacy Committee

Mailing Address 1212 S Victory Bl

City Burbank State CA Zip Code 91502

Purpose of Disbursement
Transfer

Candidate Name
Stonewall Democratic Club Issues And Advocacy Comm-
ittee

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB220000000000777033

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

A.

Full Name (Last, First, Middle Initial)

Democratic Party Of The San Fernando Valley

Mailing Address 1212 S Victory Bl

City Burbank State CA Zip Code 91502

Purpose of Disbursement
Contribution

Candidate Name
Democratic Party Of The San Fernando Valley

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB230000000000777032

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2010

Amount of Each Disbursement this Period

57.00

SUBTOTAL of Disbursements This Page (optional)

57.00

TOTAL This Period (last page this line number only)

57.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 14 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER C C00323923	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777210	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barbara Boxer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777211	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Brad Sherman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		28.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date MM / DD / YYYY 11 / 30 / 2010	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 15 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00323923</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address 15421 Red Hill Av #B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777212	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 28 <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Howard Berman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address 15421 Red Hill Av #B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777226	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Adam Schiff		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">28.14</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 3 0</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 16 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER C C00323923	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777251	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Henry Waxman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777257	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 31 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Xavier Becerra		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		28.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date MM / DD / YYYY 11 / 30 / 2010	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 17 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00323923</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address 15421 Red Hill Av #B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777263	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 32 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Judy Chu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address 15421 Red Hill Av #B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777267	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 33 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Karen Bass		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">14.07</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">28.14</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 3 0</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 18 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER C C00323923	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777269	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 34 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Lucille Roybal-Allard		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777273	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 35 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Maxine Waters		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		28.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 19 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER ▼ C C00323923	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777277	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 36 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jane Harman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777281	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 37 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Laura Richardson		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		28.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date MM / DD / YYYY 11 / 30 / 2010	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 20 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER C C00323923	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777284	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 38 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Grace Napolitano		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 15421 Red Hill Av #B		Amount 14.06	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777288	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 39 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Linda Sanchez		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		28.13	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 21 / 24

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Stonewall Democratic Club		FEC IDENTIFICATION NUMBER C C00323923	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777292	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 45 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Steve Pougnet		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee Nationwide Printing Services		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 15421 Red Hill Av #B		Amount 14.07	
City State Zip Code Tustin CA 92780		Transaction ID: SE000000000000777295	
Purpose of Expenditure Mailer		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 46 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Ken Arnold		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		28.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		225.11	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Kinde Durkee Signature		Date MM / DD / YYYY 11 / 30 / 2010	

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Stonewall Democratic Club

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 24

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Stonewall Democratic Club

A. Full Name (Last, First, Middle Initial)
Durkee & Associates

Mailing Address

1212 S Victory Bl

City	State	Zip Code
Burbank	CA	91502

001

Purpose of Disbursement:
Accounting/Report Preparation

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6334.53

Date

M	M
1	0

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4000000000000777035

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

68.45

68.45

136.90

B. Full Name (Last, First, Middle Initial)
Durkee & Associates

Mailing Address

1212 S Victory Bl

City	State	Zip Code
Burbank	CA	91502

001

Purpose of Disbursement:
Accounting/Report Preparation

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6334.53

Date

M	M
1	0

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4000000000000777037

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

65.24

65.24

130.48

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address

4130 S Market Ct

City	State	Zip Code
Sacramento	CA	95834

001

Purpose of Disbursement:
Phone Service

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6334.53

Date

M	M
1	0

 /

D	D
0	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4000000000000777039

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.58

21.57

43.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

155.27

155.26

310.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 24 / 24

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Stonewall Democratic Club

A. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address

4130 S Market Ct

City	State	Zip Code
Sacramento	CA	95834

001

Purpose of Disbursement:
Phone Service

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6334.53

Date

M	M
1	1

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4000000000000777040

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.02

22.02

44.04

B. Full Name (Last, First, Middle Initial)
Nationwide Printing Services Inc

Mailing Address

111 W Dyer Rd #AA

City	State	Zip Code
Santa Ana	CA	92707

006

Purpose of Disbursement:
Signs

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6334.53

Date

M	M
1	1

 /

D	D
0	4

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4000000000000777046

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

86.70

86.70

173.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

108.72

108.72

217.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

263.99

263.98

527.97